

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

HUCK PAC

ADDRESS (number and street)

PO BOX 2008

☐Check if different
than previously
reported. (ACC)

LITTLE ROCK

AR

72203

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00448373

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 1 0

through

1 1

2 2

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Bryan Jeffrey

Signature of Treasurer

Electronically Filed by Bryan Jeffrey

Date

1 2

0 2

2 0 1 0

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
HUCK PAC

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	192151.24
(b) Cash on Hand at Beginning of Reporting Period	202945.81	
(c) Total Receipts (from Line 19)	124606.16	944311.46
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	327551.97	1136462.70
7. Total Disbursements (from Line 31)	132973.96	941884.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	194578.01	194578.01
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name
HUCK PAC

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	61850.32	274439.32
(ii) Unitemized	59645.04	640220.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	121495.36	914659.82
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	121495.36	915659.82
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1110.80	25651.64
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2000.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	124606.16	944311.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	124606.16	944311.46

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	132203.96	772664.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	132203.96	772664.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	117500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	270.00	720.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	270.00	720.00
29. Other Disbursements.....	500.00	51000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	132973.96	941884.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132973.96	941884.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	121495.36	915659.82
34. Total Contribution Refunds (from Line 28(d))	270.00	720.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	121225.36	914939.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	132203.96	772664.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	1110.80	25651.64
38. Net Operating Expenditures (subtract Line 37 from Line 36)	131093.16	747013.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Stanley Adkins

Mailing Address 116 Vanderbilt Dr

City

Lexington

State

KS

Zip Code

40517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116606

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City

Warsaw

State

IN

Zip Code

46580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refior Law Office

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.115744

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City

Warsaw

State

IN

Zip Code

46580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refior Law Office

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116372

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City

Warsaw

State

IN

Zip Code

46580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refior Law Office

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116864

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City

Warsaw

State

IN

Zip Code

46580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refior Law Office

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.117590

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City

Warsaw

State

IN

Zip Code

46580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refior Law Office

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.117988

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

James Alexander

Mailing Address 524 Fox Dr.

City

Winchester

State

VA

Zip Code

22601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115633

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth Barkis

Mailing Address 3374 Pedley Avenue

City

Norco

State

CA

Zip Code

92860

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNUSD

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.115175

Amount of Each Receipt this Period

20.10

C.

Full Name (Last, First, Middle Initial)

Elizabeth Barkis

Mailing Address 3374 Pedley Avenue

City

Norco

State

CA

Zip Code

92860

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNUSD

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.10

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117875

Amount of Each Receipt this Period

20.10

SUBTOTAL of Receipts This Page (optional)

65.20

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Thomas Beckwith

Mailing Address 5728 Oakhurst Drive

City

Seminole

State

FL

Zip Code

33772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beckwith Electric Co., In-
c.Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11AI.117793

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Frances Beene

Mailing Address 6705 Ballard Dr.
Apt. 325

City

Chattanooga

State

TN

Zip Code

37421

FEC ID number of contributing
federal political committee.

C

Name of Employer
RequestedOccupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11AI.114840

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moffitt Cancer CenterOccupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: SA11AI.116607

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moffitt Cancer Center

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117334

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moffitt Cancer Center

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117335

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moffitt Cancer Center

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.118011

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Ernest Bianco

Mailing Address 8902 Eagle Pt. Loop Road SW

City State Zip Code
 Lakewood WA 98498

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116278

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ernest Bianco

Mailing Address 8902 Eagle Pt. Loop Road SW

City State Zip Code
 Lakewood WA 98498

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.117962

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Cheryl Bland

Mailing Address P.O. Box 250

City State Zip Code
 Bolton MS 39041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.116486

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Cheryl Bland

Mailing Address P.O. Box 250

City

Bolton

State

MS

Zip Code

39041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.117970

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Roy Bland

Mailing Address P.O. Box 250

City

Bolton

State

MS

Zip Code

39041

FEC ID number of contributing
federal political committee.

C

Name of Employer
A/C Masters, Inc.

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.116485

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Roy Bland

Mailing Address P.O. Box 250

City

Bolton

State

MS

Zip Code

39041

FEC ID number of contributing
federal political committee.

C

Name of Employer
A/C Masters, Inc.

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.117969

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth Boothe

Mailing Address 1001 East FM 700

City

Big Spring

State

TX

Zip Code

79720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kenneth C Boothe & Compan-
y, PC

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116954

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Peggy Bost

Mailing Address 5107 Cerro Vista

City

San Antonio

State

TX

Zip Code

78233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116174

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Peggy Bost

Mailing Address 5107 Cerro Vista

City

San Antonio

State

TX

Zip Code

78233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.118000

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Ann Bouchard

Mailing Address P.O. Box 1232

City

Marblehead

State

MA

Zip Code

01945

FEC ID number of contributing
federal political committee.

C

Name of Employer
Student

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.114843

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Walter Bourbon

Mailing Address 2826 Centerhill Circle

City

Bellville

State

TX

Zip Code

77418

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117007

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Howard Bowen

Mailing Address 691 County Route 41

City

Hudson Falls

State

NY

Zip Code

12839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115591

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Howard Bowen

Mailing Address 691 County Route 41

City

Hudson Falls

State

NY

Zip Code

12839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.115755

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Howard Bowen

Mailing Address 691 County Route 41

City

Hudson Falls

State

NY

Zip Code

12839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116344

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Howard Bowen

Mailing Address 691 County Route 41

City

Hudson Falls

State

NY

Zip Code

12839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117040

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Donald Bowers

Mailing Address 718 Hwy 82 E
121

City State Zip Code
Sherman TX 75090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117064

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Guy M. Bowers

Mailing Address P.O. Box 8090

City State Zip Code
Ruidoso NM 88355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117472

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Phil Brand

Mailing Address 6066 Churchill Ct

City State Zip Code
Ketchikan AK 99901

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Alaska

Occupation
Marine Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.116894

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Adrienne Brent

Mailing Address 4643 Park Mirasol

City

Calabasas

State

CA

Zip Code

91302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116725

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Adrienne Brent

Mailing Address 4643 Park Mirasol

City

Calabasas

State

CA

Zip Code

91302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116726

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Adrienne Brent

Mailing Address 4643 Park Mirasol

City

Calabasas

State

CA

Zip Code

91302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116727

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Adrienne Brent

Mailing Address 4643 Park Mirasol

City

Calabasas

State

CA

Zip Code

91302

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	1	0

Transaction ID: SA11AI.118037

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Frederick Brooks, Jr.

Mailing Address 413 Granville Rd.

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ. of North CarolinaOccupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

Transaction ID: SA11AI.114233

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Clegg Caffrey

Mailing Address P.O. Box 1055

City

Franklin

State

LA

Zip Code

70538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RequestedOccupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11AI.114828

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Wallace Carline

Mailing Address 3217 Lake Palourde Rd.
P.O. Box 2443

City State Zip Code
Morgan City LA 70381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Diamond Services Corp.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114231

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Daniel Carraway

Mailing Address 2117 Back Lake Circle

City State Zip Code
Bainbridge GA 39819

FEC ID number of contributing
federal political committee.

C

Name of Employer
DaniMer Scientific

Occupation
Founder & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115613

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Daniel Carraway

Mailing Address 2117 Back Lake Circle

City State Zip Code
Bainbridge GA 39819

FEC ID number of contributing
federal political committee.

C

Name of Employer
DaniMer Scientific

Occupation
Founder & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117805

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Bill Cassidy

Mailing Address P.O. Box 80694

City

Baton Rouge

State

LA

Zip Code

70898

FEC ID number of contributing
federal political committee.

C

Name of Employer
LSU Healthcare Network

Occupation
Hepatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114229

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

John Caswell

Mailing Address 2425 Parkwood Dr

City

Grand Prairie

State

TX

Zip Code

75050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alford Media Services

Occupation
Manager of Audio Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117727

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jeannie Chambers

Mailing Address 1215 NE 43rd Terrace

City

Kansas City

State

MO

Zip Code

64116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117004

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Jeannie Chambers

Mailing Address 1215 NE 43rd Terrace

City

Kansas City

State

MO

Zip Code

64116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117826

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Janis Cherry

Mailing Address 5 Peninsula Road

City

Belvedere

State

CA

Zip Code

94920

FEC ID number of contributing
federal political committee.

C

Name of Employer
Words To Win By

Occupation
Speechwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.115310

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Joshua Clinard

Mailing Address 7832 Woodall Road

City

Norfolk

State

VA

Zip Code

23518

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation
QuarterMaster

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116113

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Joshua Clinard

Mailing Address 7832 Woodall Road

City

Norfolk

State

VA

Zip Code

23518

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation

QuarterMaster

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.116987

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Robert Coborn

Mailing Address 712 Riverside Avenue North

City

Sartell

State

MN

Zip Code

56377

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coborn Investments

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116730

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert Coborn

Mailing Address 712 Riverside Avenue North

City

Sartell

State

MN

Zip Code

56377

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coborn Investments

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.118012

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mary Cole

Mailing Address 131 Tenbury Road

City

Lutherville

State

MD

Zip Code

21093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115621

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dirk Davis

Mailing Address 14045 Meadow Lane

City

Leawood

State

KS

Zip Code

66224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anesthesia Associates of
Kansas City

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.116935

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Kathlyn DeVincenzo

Mailing Address 1627 E. Harwood St.

City

Orlando

State

FL

Zip Code

32803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116739

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Kathlyn DeVincenzo

Mailing Address 1627 E. Harwood St.

City

Orlando

State

FL

Zip Code

32803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.118019

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Catherine Dimino

Mailing Address 1220 E. Hermosa Drive

City

Tempe

State

AZ

Zip Code

85282

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.114043

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gary Duhon

Mailing Address 53 Marquis Manor

City

Morgan City

State

LA

Zip Code

70380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jag Construction Services

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114219

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

1325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Otis Keith Dunavant

Mailing Address 1937 Spinnaker Ln.

City

Azle

State

TX

Zip Code

76020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.115728

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rich Dunwoodie

Mailing Address 118 Echo Lane West

City

Fairhope

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Xerox Corporation

Occupation
Bid Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116754

Amount of Each Receipt this Period

12.50

C.

Full Name (Last, First, Middle Initial)

Durward Dupre

Mailing Address 3929 Dove Creek Ln

City

Plano

State

TX

Zip Code

75093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Durward Dupre

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117849

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1262.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Debbie Edwards

Mailing Address 5609 Hillsborough Drive

City State Zip Code
 Plano TX 75093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.24

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117263

Amount of Each Receipt this Period

120.12

B.

Full Name (Last, First, Middle Initial)

Kenneth Eldred

Mailing Address 1075 Westridge Drive

City State Zip Code
 Portola Valley CA 94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Living Stones Foundation

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.117543

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Ramona Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
 La Quinta CA 92253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vintage Associates, Inc.

Occupation
Payroll Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117026

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1170.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Dennis Ellis

Mailing Address 5102 Howard Lane

City

Nampa

State

ID

Zip Code

83687

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116287

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bob English

Mailing Address 5200 Keller Springs Road

City

Dallas

State

TX

Zip Code

75248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117850

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Carol Enright

Mailing Address 5720 Georgia

City

Groves

State

TX

Zip Code

77619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.90

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.115176

Amount of Each Receipt this Period

20.10

SUBTOTAL of Receipts This Page (optional)

245.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 28 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Carol Enright

Mailing Address 5720 Georgia

City

Groves

State

TX

Zip Code

77619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.116409

Amount of Each Receipt this Period

20.10

B.

Full Name (Last, First, Middle Initial)

Carol Enright

Mailing Address 5720 Georgia

City

Groves

State

TX

Zip Code

77619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.10

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117858

Amount of Each Receipt this Period

20.10

C.

Full Name (Last, First, Middle Initial)

Carol Enright

Mailing Address 5720 Georgia

City

Groves

State

TX

Zip Code

77619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.20

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.117966

Amount of Each Receipt this Period

20.10

SUBTOTAL of Receipts This Page (optional)

60.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Jon Eubanks

Mailing Address 2543 Greasy Valley Rd

City State Zip Code
 Paris AR 72855

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.116560

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Janis Fitzgerald

Mailing Address 4834 Elkhorn Hill Drive

City State Zip Code
 Suwanee GA 30024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.115121

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Martha Anne Foster

Mailing Address 2082 Hwy. 317

City State Zip Code
 Franklin LA 70538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114227

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 30 / 134

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Theresa Freihofer

Mailing Address 1100 W. Oak Street

City

Ozark

State

MO

Zip Code

65721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ozark R-VI Schools

Occupation

Substitute Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115415

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Alfred Gigante

Mailing Address 83 Franklin Turnpike

City

Waldwick

State

NJ

Zip Code

07463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.118031

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Alice Goldsmith

Mailing Address 1308 Baywood Dr.

City

Brea

State

CA

Zip Code

92821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.114880

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Catherine Greenlaw

Mailing Address 904 E South St

City

Lindale

State

TX

Zip Code

75771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116615

Amount of Each Receipt this Period

20.10

B.

Full Name (Last, First, Middle Initial)

Brian Groover

Mailing Address 221 B East Thomas St

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Medical Ctr of Central
GA

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.116056

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Brian Groover

Mailing Address 221 B East Thomas St

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Medical Ctr of Central
GA

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.117940

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

40.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mary Hackerman

Mailing Address 3402 Ella Lee Ln

City

Houston

State

TX

Zip Code

77027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116104

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Darlean Hahn

Mailing Address 5259 101 Rd. NW

City

Tioga

State

ND

Zip Code

58852

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.114037

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Darlean Hahn

Mailing Address 5259 101 Rd. NW

City

Tioga

State

ND

Zip Code

58852

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117437

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Carol Hansford

Mailing Address 6542 Arborcrest Lane

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117125

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gary Hanson

Mailing Address 2100 E Broadway Avenue

City

Bismarck

State

ND

Zip Code

58501

FEC ID number of contributing
federal political committee.

C

Name of Employer
House of Color Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.117628

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Edward Hasley

Mailing Address 1416 Wood Street

City

Texarkana

State

TX

Zip Code

75501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.115951

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Edward Hasley

Mailing Address 1416 Wood Street

City

Texarkana

State

TX

Zip Code

75501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116073

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Edward Hasley

Mailing Address 1416 Wood Street

City

Texarkana

State

TX

Zip Code

75501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.117920

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Edward Hasley

Mailing Address 1416 Wood Street

City

Texarkana

State

TX

Zip Code

75501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117952

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mildred Heaton

Mailing Address P. O. Box 924

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mildred C. Heaton Realty,
Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115818

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mildred Heaton

Mailing Address P. O. Box 924

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mildred C. Heaton Realty,
Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115821

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mildred Heaton

Mailing Address P. O. Box 924

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mildred C. Heaton Realty,
Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117002

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mildred Heaton

Mailing Address P. O. Box 924

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mildred C. Heaton Realty,
Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.117906

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mildred Heaton

Mailing Address P. O. Box 924

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mildred C. Heaton Realty,
Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.117907

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Anne Hise

Mailing Address 4426 W. Lakeshore Dr.

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Hise Company

Occupation

Geologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114223

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Bill Hise

Mailing Address 4426 W. Lakeshore Dr.

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Hise Company

Occupation

Consulting Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.114225

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Deborah Hoffmeyer

Mailing Address 926 Huntington Drive

City

Duncanville

State

TX

Zip Code

75137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Lighthouse Event Decorator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115795

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Deborah Hoffmeyer

Mailing Address 926 Huntington Drive

City

Duncanville

State

TX

Zip Code

75137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Lighthouse Event Decorator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117130

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Joy Holland

Mailing Address 2002 Rosemond Avenue

City	State	Zip Code
Jonesboro	AR	72401

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Bernards Medical Cent-
erOccupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	0

Transaction ID: SA11AI.116020

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Joy Holland

Mailing Address 2002 Rosemond Avenue

City	State	Zip Code
Jonesboro	AR	72401

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Bernards Medical Cent-
erOccupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	0

Transaction ID: SA11AI.117936

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Connie Horsley

Mailing Address 101 Jays Lane

City	State	Zip Code
Stephensport	KY	40170

FEC ID number of contributing
federal political committee.

C

Name of Employer
English Baptist ChurchOccupation
Secretary/Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	0

Transaction ID: SA11AI.117147

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Carol Hunter

Mailing Address 800 Rawhide Drive

City

Kingman

State

AZ

Zip Code

86401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Apartment Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116138

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Marc Iverson

Mailing Address 6037 Sharon Road

City

Charlotte

State

NC

Zip Code

28210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Disabled

Occupation

Disabled

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.115708

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

David Jones

Mailing Address 6567 Ashby Grove Loop

City

Haymarket

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Paul's

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115625

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

David Jones

Mailing Address 6567 Ashby Grove Loop

City

Haymarket

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Paul's

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116091

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

David Jones

Mailing Address 6567 Ashby Grove Loop

City

Haymarket

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Paul's

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.116438

Amount of Each Receipt this Period

1009.00

C.

Full Name (Last, First, Middle Initial)

David Jones

Mailing Address 6567 Ashby Grove Loop

City

Haymarket

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Paul's

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116984

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1059.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

David Jones

Mailing Address 6567 Ashby Grove Loop

City

Haymarket

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Paul's

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1394.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117666

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Steve Jones

Mailing Address 407 W Rusk Street

City

Mount Enterprise

State

TX

Zip Code

75681

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Forrester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.114748

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Norma Kaecker

Mailing Address 4015 E Soliere Ave

City

Flagstaff

State

AZ

Zip Code

86004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116794

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Joanne Kean

Mailing Address 720 E Ocean Ave 505W

City

Boynton Beach

State

FL

Zip Code

33435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116719

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Joanne Kean

Mailing Address 720 E Ocean Ave 505W

City

Boynton Beach

State

FL

Zip Code

33435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116720

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Kyungae Kim

Mailing Address 19486 E 58th Cir

City

Aurora

State

CO

Zip Code

80019

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Colorado Ho-
spital

Occupation
Medical Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.115656

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Kyungae Kim

Mailing Address 19486 E 58th Cir

City

Aurora

State

CO

Zip Code

80019

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Colorado Ho-
spital

Occupation

Medical Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116238

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Larry Kirk

Mailing Address 905 Jefferson

City

Berryville

State

AR

Zip Code

72616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117041

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Larry Kirk

Mailing Address 905 Jefferson

City

Berryville

State

AR

Zip Code

72616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117180

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Barbara Klassen

Mailing Address 7682 Prospector Hollow Lane

City State Zip Code
Pocatello ID 83201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.117938

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Marta Kopaskie

Mailing Address 241 Tompkins Rd.

City State Zip Code
Montgomery NY 12549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.115661

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Marta Kopaskie

Mailing Address 241 Tompkins Rd.

City State Zip Code
Montgomery NY 12549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116835

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Marta Kopaskie

Mailing Address 241 Tompkins Rd.

City

Montgomery

State

NY

Zip Code

12549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117168

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Marta Kopaskie

Mailing Address 241 Tompkins Rd.

City

Montgomery

State

NY

Zip Code

12549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117661

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Virginia Lattig

Mailing Address 423 Fox Chase Road

City

Wirtz

State

VA

Zip Code

24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115398

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Virginia Lattig

Mailing Address 423 Fox Chase Road

City

Wirtz

State

VA

Zip Code

24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117783

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dominic Leung

Mailing Address 22059 E. Lyndon Loop

City

Castro Valley

State

CA

Zip Code

94552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.116523

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Robert Levesque

Mailing Address 6355 Vintage Court

City

Lockport

State

NY

Zip Code

14094

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117179

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Keet Lewis

Mailing Address 3750 Duchess Trail

City

Dallas

State

TX

Zip Code

75229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lewis Group International

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.117539

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Cheryl Lindheimer

Mailing Address P.O. Box 2090

City

Monrovia

State

CA

Zip Code

91017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117070

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John S. Lippincott

Mailing Address 114 5th Ave.

City

Seaside Park

State

NJ

Zip Code

08752

FEC ID number of contributing
federal political committee.

C

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.117545

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 48 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Kim Looney

Mailing Address P.O. Box 252

City

Turners

State

MO

Zip Code

65765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Springfield Builders, Inc.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.114048

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Shelby Lorenzen

Mailing Address 3941 Nikita Drive

City

Hope Mills

State

NC

Zip Code

28348

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.114565

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Shelby Lorenzen

Mailing Address 3941 Nikita Drive

City

Hope Mills

State

NC

Zip Code

28348

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.117548

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

M & M Electric Services Co., LLC

Mailing Address 864 Highway 384

City

Lake Charles

State

LA

Zip Code

70607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.118100

Amount of Each Receipt this Period

2000.00

See Memos for Partner At-
tribution

B.

Full Name (Last, First, Middle Initial)

Edward McCain

Mailing Address 864 Highway 384

City

Lake Charles

State

LA

Zip Code

70607

FEC ID number of contributing
federal political committee.

C

Name of Employer
M & M Electric Services
Co.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.118100.0

Amount of Each Receipt this Period

1000.00

M & M Electric Services
Co., LLC - Partnership At-
tribution

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Neluyu McCain

Mailing Address 864 Highway 384

City

Lake Charles

State

LA

Zip Code

70607

FEC ID number of contributing
federal political committee.

C

Name of Employer
M & M Electric Services
Co.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.118100.1

Amount of Each Receipt this Period

1000.00

M & M Electric Services
Co., LLC - Partnership At-
tribution

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Susan McCarthy

Mailing Address 529 Turtle Creek Court

City

O'Fallon

State

IL

Zip Code

62269

FEC ID number of contributing
federal political committee.

C

Name of Employer
Family Physicians of O'Fa-
llon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.116927

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Susan McCarthy

Mailing Address 529 Turtle Creek Court

City

O'Fallon

State

IL

Zip Code

62269

FEC ID number of contributing
federal political committee.

C

Name of Employer
Family Physicians of O'Fa-
llon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.116928

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John McCune

Mailing Address 7373 E. 29th ST. N, Apt W127

City

Wichita

State

KS

Zip Code

67226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116699

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Joseph McGrath

Mailing Address 808 Sylvan Hill Dr.

City

Jonesboro

State

AR

Zip Code

72401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11AI.114662

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Robert McWilliams

Mailing Address 492 W. Cherry Road

City

Hayesville

State

NC

Zip Code

28904

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.116502

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Stephanie Meador

Mailing Address 19980 Hwy 70 E

City

Heth

State

AR

Zip Code

72346

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Francis Hospital-Bart-
lettOccupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.116922

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 52 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mary Merica

Mailing Address 5211 N 150 St

City

Omaha

State

NE

Zip Code

68116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Aflac Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116115

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

John Milhoan

Mailing Address 177 Linnwood Rd

City

Eighty Four

State

PA

Zip Code

15330

FEC ID number of contributing
federal political committee.

C

Name of Employer
PES

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.115988

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Miller

Mailing Address 906 Natoma Street

City

Folsom

State

CA

Zip Code

95630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Network

Occupation

Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.117960

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Dorothy Moore

Mailing Address 228 Black Walnut Drive

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.116555

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Dorothy Moore

Mailing Address 228 Black Walnut Drive

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.116556

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Dorothy Moore

Mailing Address 228 Black Walnut Drive

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.117985

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Dorothy Moore

Mailing Address 228 Black Walnut Drive

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.117986

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Gwendolyn Moore

Mailing Address 10135 Cougar Ridge Parkway

City

Waco

State

TX

Zip Code

76708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.117931

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Marty Morehouse

Mailing Address 301 Wilcrest 4307

City

Houston

State

TX

Zip Code

77042

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.G. Miller Engineers

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116103

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Marty Morehouse

Mailing Address 301 Wilcrest 4307

City

Houston

State

TX

Zip Code

77042

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.G. Miller Engineers

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116830

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Marty Morehouse

Mailing Address 301 Wilcrest 4307

City

Houston

State

TX

Zip Code

77042

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.G. Miller Engineers

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.117904

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Robert Morgan

Mailing Address 212 Range Ave.

City

Denham Springs

State

LA

Zip Code

70726

FEC ID number of contributing
federal political committee.

C

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.114735

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Robert Morris

Mailing Address 307 Beach Drive

City

State

Zip Code

Destin

FL

32541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corpus Christi Catholic
Church

Occupation
Pastor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.115973

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Robert Morris

Mailing Address 307 Beach Drive

City

State

Zip Code

Destin

FL

32541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corpus Christi Catholic
Church

Occupation
Pastor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.117925

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michael Mosby

Mailing Address P.O. Box 1208

City

State

Zip Code

Canton

TX

75103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastern Mechanical Contra-
ctors, Inc.

Occupation
Mechanical Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.115009

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

John Mumford

Mailing Address 2925 Woodside Rd.

City

Woodside

State

CA

Zip Code

94062

FEC ID number of contributing
federal political committee.

C

Name of Employer
CPVP Mgmt LLP

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.114850

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Loretta Neal

Mailing Address 1301 Ave I

City

Anson

State

TX

Zip Code

79501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.116070

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Loretta Neal

Mailing Address 1301 Ave I

City

Anson

State

TX

Zip Code

79501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.50

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.117991

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

5125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Naomi Needham

Mailing Address 7210 SW 93rd St.

City

Wakarusa

State

KS

Zip Code

66546

FEC ID number of contributing
federal political committee.

C

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.114736

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James Neff

Mailing Address 23988 Zion Ave. P.O.Box 189
P.O.Box 189

City

Winsted

State

MN

Zip Code

55395

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.116427

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Phyllis Nicholas

Mailing Address 40 Howard Road

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116661

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Jan Nilsen

Mailing Address 10240 Hendley Road

City

Manassas

State

VA

Zip Code

20110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.115018

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Niven Noll

Mailing Address 4691 Whispering Pines Lane

City

Las Cruces

State

NM

Zip Code

88007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116970

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Bradley O'Leary

Mailing Address 3050 Tammaron Blvd.
#6101

City

Austin

State

TX

Zip Code

78746

FEC ID number of contributing
federal political committee.

C

Name of Employer
PM-Direct

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.114106

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Jean Overton

Mailing Address 1735 Meiers Ct. N.W.

City

Cedar Rapids

State

IA

Zip Code

52405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116952

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michael Pasquinilli

Mailing Address 10703 Linn Station Road

City

Louisville

State

KY

Zip Code

40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insight

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.116518

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Connie Payton

Mailing Address 27307 Hemet St.

City

Hemet

State

CA

Zip Code

92544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.117967

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Kay Payton

Mailing Address 5303 East 79th Street

City State Zip Code
Tulsa OK 74136

FEC ID number of contributing
federal political committee.

C

Name of Employer
Celebrity Attractions

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117726

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Augusta Petrone

Mailing Address PO Box 1037

City State Zip Code
Dublin NH 03444

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.116004

Amount of Each Receipt this Period

203.00

C.

Full Name (Last, First, Middle Initial)

Robert Phoenix

Mailing Address 6522 Rossford Ln

City State Zip Code
Durham NC 27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Credit Suisse

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116292

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

5228.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Robert Phoenix

Mailing Address 6522 Rossford Ln

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Credit Suisse

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.117953

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ben Porter

Mailing Address P. O. Box 1527

City

Newnan

State

GA

Zip Code

30264

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elder Care Pharmacy

Occupation
RPh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.115193

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ben Porter

Mailing Address P. O. Box 1527

City

Newnan

State

GA

Zip Code

30264

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elder Care Pharmacy

Occupation
RPh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116362

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Margaret Weber Powala

Mailing Address 714 Woodcrest Rd

City

State

Zip Code

Radnor

PA

19087

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Pharmaceutical Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.117580

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Faith Pressler

Mailing Address 65 Redneck Avenue

City

State

Zip Code

Little Ferry

NJ

07643

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.115152

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Faith Pressler

Mailing Address 65 Redneck Avenue

City

State

Zip Code

Little Ferry

NJ

07643

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116677

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Tina Prevatt

Mailing Address 22388 Deerpath Court

City

Great Mills

State

MD

Zip Code

20634

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117046

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Charles Redfield

Mailing Address 5129 Creek Drive

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117016

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Eugene Rhodes

Mailing Address 3900 Park Green Drive

City

Corona Del Mar

State

CA

Zip Code

92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhodes Development Co.

Occupation

Real Estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117177

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

David Rue

Mailing Address 115 Wilson Drive

City

Xenia

State

OH

Zip Code

45385

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117305

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

David Schilling

Mailing Address 7690 County Highway 134

City

Nevada

State

OH

Zip Code

44849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116675

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Richard See

Mailing Address P.O. Box 924298

City

Princeton

State

FL

Zip Code

33092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seedway, LLC

Occupation
Vegetable Seed Salesman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.115694

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Richard See

Mailing Address P.O. Box 924298

City

Princeton

State

FL

Zip Code

33092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seedway, LLC

Occupation

Vegetable Seed Salesman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.116903

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Patricia Serio

Mailing Address 20134 Damerall Dr

City

Covina

State

CA

Zip Code

91724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Serco Mold Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	1	0

Transaction ID: SA11AI.115692

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Patricia Serio

Mailing Address 20134 Damerall Dr

City

Covina

State

CA

Zip Code

91724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Serco Mold Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	1	0

Transaction ID: SA11AI.116021

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Serio

Mailing Address 20134 Dameral Dr

City

Covina

State

CA

Zip Code

91724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Serco Mold Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.117939

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Roger Sherman

Mailing Address 1124 12th Ave NW

City

Arab

State

AL

Zip Code

35016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lockheed Martin Space Sys-
tems

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115433

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John Shields

Mailing Address 817 Lancelot Circle

City

Collierville

State

TN

Zip Code

38017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.116543

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Sallie Simpson

Mailing Address 1400 Molson Lake Drive

City

Leander

State

TX

Zip Code

78641

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	1	0

Transaction ID: SA11AI.116009

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Amos Slater

Mailing Address 23180 Harper Avenue

City

Port Charlotte

State

FL

Zip Code

33980

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vehicle Clinic, Inc.Occupation
Technician & Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	0

Transaction ID: SA11AI.116033

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

James Smith

Mailing Address PO Box 5259

City

Eagle

State

CO

Zip Code

81631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amware Logistics Svcs.Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	1	0

Transaction ID: SA11AI.116000

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Richard Sprowl

Mailing Address 4714 S Colonial Oaks Dr
Apt. 618

City State Zip Code
Marion IN 46953

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.117039

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Richard Sprowl

Mailing Address 4714 S Colonial Oaks Dr
Apt. 618

City State Zip Code
Marion IN 46953

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117705

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Justin Stanley

Mailing Address 313 Leonard Hunt Road

City State Zip Code
Leesville LA 71446

FEC ID number of contributing
federal political committee.

C

Name of Employer
First National Bank DeRid-
der

Occupation
Assistant VP/Loan Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115823

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Justin Stanley

Mailing Address 313 Leonard Hunt Road

City

Leesville

State

LA

Zip Code

71446

FEC ID number of contributing
federal political committee.

C

Name of Employer
First National Bank DeRid-
der

Occupation

Assistant VP/Loan Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115824

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Justin Stanley

Mailing Address 313 Leonard Hunt Road

City

Leesville

State

LA

Zip Code

71446

FEC ID number of contributing
federal political committee.

C

Name of Employer
First National Bank DeRid-
der

Occupation

Assistant VP/Loan Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.117908

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Justin Stanley

Mailing Address 313 Leonard Hunt Road

City

Leesville

State

LA

Zip Code

71446

FEC ID number of contributing
federal political committee.

C

Name of Employer
First National Bank DeRid-
der

Occupation

Assistant VP/Loan Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.117909

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Neil Steiner

Mailing Address 7598 Lakeside Village Drive
Apt I

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ. of Southern Califor-
nia

Occupation
Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.117901

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.J.Hicks Lumber Co.

Occupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.115022

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.J.Hicks Lumber Co.

Occupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117663

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 134

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Donna Sudbrook

Mailing Address 5327 Briar Oak Ct

City

Ellicott City

State

MD

Zip Code

21043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Transaction ID: SA11AI.116086

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Donna Sudbrook

Mailing Address 5327 Briar Oak Ct

City

Ellicott City

State

MD

Zip Code

21043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

Transaction ID: SA11AI.116964

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Pamela Thomas

Mailing Address 410 Deer Pointe Circle

City

Casselberry

State

FL

Zip Code

32707

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Central Flo-
rida

Occupation

Faculty Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

Transaction ID: SA11AI.116718

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Pamela Thomas

Mailing Address 410 Deer Pointe Circle

City

Casselberry

State

FL

Zip Code

32707

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Central Flo-
rida

Occupation

Faculty Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.118034

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jo Tiner

Mailing Address 1213 Kiowa Drive West

City

Lake Kiowa

State

TX

Zip Code

76240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.115336

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jo Tiner

Mailing Address 1213 Kiowa Drive West

City

Lake Kiowa

State

TX

Zip Code

76240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117734

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Tipton

Mailing Address 14266 Pine Creek Lane

City

State

Zip Code

Baker City

OR

97814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Treasure Valley Lab

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.118035

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bruce Travis

Mailing Address 720 Haywood Cedar Grove Rd

City

State

Zip Code

Glasgow

KY

42141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116712

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Bruce Travis

Mailing Address 720 Haywood Cedar Grove Rd

City

State

Zip Code

Glasgow

KY

42141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116713

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paul True

Mailing Address 159 Ort Lane

City

Merlin

State

OR

Zip Code

97532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Linx Technologies, Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.116548

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Meredith Turner

Mailing Address 3050 Margaret Mitchell Dr
Unit 31

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
24/7 Gateway, LLC

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115616

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Meredith Turner

Mailing Address 3050 Margaret Mitchell Dr
Unit 31

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
24/7 Gateway, LLC

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.116277

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

515.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Meredith Turner

Mailing Address 3050 Margaret Mitchell Dr
Unit 31

City State Zip Code
Atlanta GA 30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
24/7 Gateway, LLC

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117787

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Raymond Usell

Mailing Address 14341 Range Park Road

City State Zip Code
Poway CA 92064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.115822

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Raymond Usell

Mailing Address 14341 Range Park Road

City State Zip Code
Poway CA 92064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.117910

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Tom Vande Guchte

Mailing Address 1000 Las Brisas Ct

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116639

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Ronald Van Putte

Mailing Address 111 Sleepy Oaks Road NW

City

Fort Walton Beach

State

FL

Zip Code

32548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116075

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Ronald Van Putte

Mailing Address 111 Sleepy Oaks Road NW

City

Fort Walton Beach

State

FL

Zip Code

32548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117951

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

5020.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Walsh

Mailing Address P.O. Box 306

City

Chappell Hill

State

TX

Zip Code

77426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fab and Construction

Occupation

General Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117855

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ronald Waters

Mailing Address 158 Congdon Rd

City

Voluntown

State

CT

Zip Code

06384

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOD Nancy

Occupation

Logistic Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.114954

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Ronald Waters

Mailing Address 158 Congdon Rd

City

Voluntown

State

CT

Zip Code

06384

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOD Nancy

Occupation

Logistic Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115406

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Ronald Waters

Mailing Address 158 Congdon Rd

City

Voluntown

State

CT

Zip Code

06384

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOD Nacy

Occupation

Logistic Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117765

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Carol Webb

Mailing Address 800 Meadow Lake Drive

City

Edmond

State

OK

Zip Code

73003

FEC ID number of contributing
federal political committee.

C

Name of Employer
LSB Industries

Occupation

Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.117197

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Carol Weibert

Mailing Address 2731 Heartland Valley Drive

City

Manhattan

State

KS

Zip Code

66503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Decatur County Feed Yard

Occupation

Co-Owners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116960

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Warren Weibert

Mailing Address 2731 Heartland Valley Drive

City

Manhattan

State

KS

Zip Code

66503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Decatur County Feed Yard

Occupation
Co-Owners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.116962

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Marcia Weisz

Mailing Address 324 Magnolia Avenue
Spc 18

City

Lemoore

State

CA

Zip Code

93245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115634

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Marcia Weisz

Mailing Address 324 Magnolia Avenue
Spc 18

City

Lemoore

State

CA

Zip Code

93245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.117876

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Stephen Widdows

Mailing Address 1415 Depot St.

City

Iron Station

State

NC

Zip Code

28080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Draftsman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116872

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Jay Wight

Mailing Address 306 Edgemore Ave.

City

Cary

State

NC

Zip Code

27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.115400

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation
Forklift Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116077

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116078

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.116079

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117947

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117948

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117949

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Christopher Wilkerson

Mailing Address 5915 Trammell Road

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Auto Auctions

Occupation

Forklift Operator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 1 0

Transaction ID: SA11AI.117950

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Karen Winstead

Mailing Address 180 Lakewood Court

City

Rocky Mount

State

VA

Zip Code

24151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carilion Franklin Memorial

Occupation

RN, Certified Nurse Midwife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.116663

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Doris Wolfe

Mailing Address 706 W. Katella Ct.

City

Springfield

State

MO

Zip Code

65807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.117716

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jensen Young

Mailing Address 261 Highland
#199

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Of Louisiana

Occupation

Financial Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.117596

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Zacharias

Mailing Address 1005 E. 134th Street

City

Grandview

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Weather Service

Occupation

Meteorologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.116871

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

61850.32

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 134

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Family Research Council Action

Mailing Address 801 G STREET NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1110.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Transaction ID: SA15.118092

Amount of Each Receipt this Period

1110.80

Travel Reimbursement

SUBTOTAL of Receipts This Page (optional)

1110.80

TOTAL This Period (last page this line number only)

1110.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 134

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Jim Keet for Governor

Mailing Address P.O. Box 25436

City

Little Rock

State

AR

Zip Code

72221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA16.118091

Amount of Each Receipt this Period

2000.00

Refund of Campaign Contri-
bution

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Apptix DBA MailStreet

Mailing Address Dept. CH19172

City State Zip Code
Palatine IL 60055

Purpose of Disbursement
Blackberry Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

148.31

B.

Full Name (Last, First, Middle Initial)

Apptix DBA MailStreet

Mailing Address Dept. CH19172

City State Zip Code
Palatine IL 60055

Purpose of Disbursement
Blackberry Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.118074

Date of Disbursement

/ /

Amount of Each Disbursement this Period

148.31

C.

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address P.O. Box 650661

City State Zip Code
Dallas TX 75265

Purpose of Disbursement
Telephone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113637

Date of Disbursement

/ /

Amount of Each Disbursement this Period

321.08

SUBTOTAL of Disbursements This Page (optional)

617.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.113658 Date of Disbursement																				
Mailing Address P.O. Box 650661	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	1	0												
City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">208.18</td> </tr> </table>	208.18																			
208.18																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.117397 Date of Disbursement																				
Mailing Address P.O. Box 650661	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	1	0												
City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">320.04</td> </tr> </table>	320.04																			
320.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.118075 Date of Disbursement																				
Mailing Address P.O. Box 650661	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	1	0												
City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">208.11</td> </tr> </table>	208.11																			
208.11																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

736.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113652</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2637.61</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113668</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 30.08</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117391</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 63.51</p>

SUBTOTAL of Disbursements This Page (optional)

2731.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118073</p> <p>Date of Disbursement <div> <div>11</div> <div>19</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>224.46</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ccAdvertising</p> <p>Mailing Address 13800 Coppermine Road</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Fundraising Survey</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113621</p> <p>Date of Disbursement <div> <div>10</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>5000.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Judith A. Crouch</p> <p>Mailing Address 59 Belmont Drive</p> <p>City Little Rock State AR Zip Code 72204</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113680</p> <p>Date of Disbursement <div> <div>10</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>2060.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

7284.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.113681 Date of Disbursement
Mailing Address 59 Belmont Drive	<div> <div>^M10</div> <div>/</div> <div>^D15</div> <div>/</div> <div>^Y2010</div> </div>
City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>2060.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.117344 Date of Disbursement
Mailing Address 59 Belmont Drive	<div> <div>^M11</div> <div>/</div> <div>^D01</div> <div>/</div> <div>^Y2010</div> </div>
City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>2060.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.117408 Date of Disbursement
Mailing Address 59 Belmont Drive	<div> <div>^M11</div> <div>/</div> <div>^D15</div> <div>/</div> <div>^Y2010</div> </div>
City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>2060.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6180.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 93 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Direct Response Strategies</p> <p>Mailing Address 4025 Ellicott Street</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Direct Mail Postage - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113661 Date of Disbursement <div>10 / 20 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>1950.00</div></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Direct Response Strategies</p> <p>Mailing Address 4025 Ellicott Street</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Direct Mail Postage - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118083 Date of Disbursement <div>11 / 19 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>8724.27</div></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) J. Hogan Gidley</p> <p>Mailing Address 2507 Rigby Drive</p> <p>City Columbia State SC Zip Code 29204</p> <p>Purpose of Disbursement Reimbursement - Health Insurance, Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113626 Date of Disbursement <div>10 / 01 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>243.36</div></p>

SUBTOTAL of Disbursements This Page (optional)

10917.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.113682 Date of Disbursement																				
Mailing Address 2507 Rigby Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	1	0												
City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.113683 Date of Disbursement																				
Mailing Address 2507 Rigby Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	1	0												
City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.117345 Date of Disbursement																				
Mailing Address 2507 Rigby Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	1	0												
City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.117395 Date of Disbursement
Mailing Address 2507 Rigby Drive	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Health Insurance, Telephone Service Candidate Name	<div>243.36</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.117409 Date of Disbursement
Mailing Address 2507 Rigby Drive	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) GSL Solutions, Inc.	Transaction ID: SB21B.113656 Date of Disbursement
Mailing Address 1411 N. Westshore Boulevard Suite 204	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D1</div> <div>^D8</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City Tampa State FL Zip Code 33607	Amount of Each Disbursement this Period
Purpose of Disbursement Web Development/Hosting Candidate Name	<div>5352.22</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10595.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westshore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117401 Date of Disbursement <div> <div>11</div> <div>05</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>5839.96</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Katherine E. Harris</p> <p>Mailing Address 3226 Stonepine</p> <p>City Bryant State AR Zip Code 72022</p> <p>Purpose of Disbursement Mileage Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113624 Date of Disbursement <div> <div>10</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>79.34</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Katherine E. Harris</p> <p>Mailing Address 3226 Stonepine</p> <p>City Bryant State AR Zip Code 72022</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113684 Date of Disbursement <div> <div>10</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1500.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

7419.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.113636 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 8 / 2 0 1 0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Health & Dental Insurance Reimbursement Candidate Name	<div> <div>130.75</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.113685 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>1500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.113672 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 1 0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Mileage Reimbursement Candidate Name	<div> <div>112.21</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1742.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.117346 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D1</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div>1500.00</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.117402 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Health & Dental Insurance Reimbursement Candidate Name	<div>130.75</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.118069 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Mileage Reimbursement Candidate Name	<div>48.09</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1678.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.118079 Date of Disbursement
Mailing Address 3226 Stonepine	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div>1500.00</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Heritage Communications, Inc.	Transaction ID: SB21B.113653 Date of Disbursement
Mailing Address 2402 Wildwood Ave.	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D1</div> <div>^D8</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Sherwood AR 72120	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Equipment Lease Candidate Name	<div>398.62</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Heritage Communications, Inc.	Transaction ID: SB21B.117398 Date of Disbursement
Mailing Address 2402 Wildwood Ave.	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D0</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City State Zip Code Sherwood AR 72120	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Equipment Lease Candidate Name	<div>236.25</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2134.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Heritage Communications, Inc.

Mailing Address 2402 Wildwood Ave.

City State Zip Code
Sherwood AR 72120

Purpose of Disbursement
Telephone Equipment Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.31

B.

Full Name (Last, First, Middle Initial)
Holtzman Vogel, PLLC

Mailing Address 45 North Hill Drive
Suite 100

City State Zip Code
Warrenton VA 20186

Purpose of Disbursement
Consulting - Legal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113667

Date of Disbursement

/ /

Amount of Each Disbursement this Period

958.75

C.

Full Name (Last, First, Middle Initial)
Holtzman Vogel, PLLC

Mailing Address 45 North Hill Drive
Suite 100

City State Zip Code
Warrenton VA 20186

Purpose of Disbursement
Consulting - Legal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117396

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1872.50

SUBTOTAL of Disbursements This Page (optional)

3030.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.113623 Date of Disbursement
Mailing Address #2 Cedar Point Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 1 / 2 0 1 0</div> </div>
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Health Insurance, Telephone Service, Travel Expense Candidate Name	<div> <div>400.33</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.113687 Date of Disbursement
Mailing Address #2 Cedar Point Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 1 / 2 0 1 0</div> </div>
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>6998.61</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.113688 Date of Disbursement
Mailing Address #2 Cedar Point Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 1 0</div> </div>
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>1500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

8898.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.113676 Date of Disbursement																				
Mailing Address #2 Cedar Point Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	1	0												
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement - Travel Expense Candidate Name	<table border="1"> <tr> <td colspan="10">910.72</td> </tr> </table>	910.72																			
910.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.117347 Date of Disbursement																				
Mailing Address #2 Cedar Point Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	1	0												
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.117394 Date of Disbursement																				
Mailing Address #2 Cedar Point Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	5		2	0	1	0												
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement - Health Insurance, Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">375.00</td> </tr> </table>	375.00																			
375.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2785.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.117411 Date of Disbursement
Mailing Address #2 Cedar Point Court	<div> <div>^M1</div> <div>^M1</div> <div>/</div> <div>^D1</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mike Huckabee	Transaction ID: SB21B.113655 Date of Disbursement
Mailing Address 1134 Silverwood Trail	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D1</div> <div>^D8</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City North Little Rock State AR Zip Code 72116	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Travel Expense	<div>322.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mike Huckabee	Transaction ID: SB21B.113669 Date of Disbursement
Mailing Address 1134 Silverwood Trail	<div> <div>^M1</div> <div>^M0</div> <div>/</div> <div>^D2</div> <div>^D5</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y1</div> <div>^Y0</div> </div>
City North Little Rock State AR Zip Code 72116	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Travel Expense	<div>135.66</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1958.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.113689 Date of Disbursement																				
Mailing Address 15 Thankful Bradley Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	1	0												
City West Redding State CT Zip Code 06896	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1751.00</td> </tr> </table>	1751.00																			
1751.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.113690 Date of Disbursement																				
Mailing Address 15 Thankful Bradley Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	1	0												
City West Redding State CT Zip Code 06896	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1751.00</td> </tr> </table>	1751.00																			
1751.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.117348 Date of Disbursement																				
Mailing Address 15 Thankful Bradley Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	1	0												
City West Redding State CT Zip Code 06896	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1751.00</td> </tr> </table>	1751.00																			
1751.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5253.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
David M. John

Mailing Address 15 Thankful Bradley Road

City State Zip Code
West Redding CT 06896

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.117412

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1751.00

B.

Full Name (Last, First, Middle Initial)
JPMS Cox

Mailing Address 11300 Cantrell Road
Suite 301

City State Zip Code
Little Rock AR 72212

Purpose of Disbursement
Accounting & Compliance Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6000.00

C.

Full Name (Last, First, Middle Initial)
JPMS Cox

Mailing Address 11300 Cantrell Road
Suite 301

City State Zip Code
Little Rock AR 72212

Purpose of Disbursement
Accounting & Compliance Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.118076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6000.00

SUBTOTAL of Disbursements This Page (optional)

13751.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) LCM Strategies	Transaction ID: SB21B.113657 Date of Disbursement
Mailing Address 3409 Hopkins Street	<div> <div>10</div> <div>18</div> <div>2010</div> </div>
City Nashville State TN Zip Code 37215	Amount of Each Disbursement this Period
Purpose of Disbursement Direct Mail - PAC Fundraising Candidate Name	<div>4500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.113620 Date of Disbursement
Mailing Address 12921 Cantrell Road Suite 100	<div> <div>10</div> <div>01</div> <div>2010</div> </div>
City Little Rock State AR Zip Code 72223	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Taxes Candidate Name	<div>1322.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.113648 Date of Disbursement
Mailing Address 12921 Cantrell Road Suite 100	<div> <div>10</div> <div>15</div> <div>2010</div> </div>
City Little Rock State AR Zip Code 72223	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Taxes Candidate Name	<div>902.01</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

6724.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118093</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 256.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117343</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 902.01</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118071</p> <p>Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 96.01</p>

SUBTOTAL of Disbursements This Page (optional)

1254.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 12921 Cantrell Road
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.118072

Date of Disbursement

/ /

Amount of Each Disbursement this Period

902.01

B.

Full Name (Last, First, Middle Initial)
Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

222.55

C.

Full Name (Last, First, Middle Initial)
Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113628

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.20

SUBTOTAL of Disbursements This Page (optional)

1157.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113629

Date of Disbursement

10 / 03 / 2010

Amount of Each Disbursement this Period

11.53

B.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113630

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

93.25

C.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113631

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

146.88

SUBTOTAL of Disbursements This Page (optional)

251.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113633</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.75"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113634</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="53.22"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113635</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.69"/></p>

SUBTOTAL of Disbursements This Page (optional)

176.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113641

Date of Disbursement

10 / 09 / 2010

Amount of Each Disbursement this Period

9.40

B.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113642

Date of Disbursement

10 / 10 / 2010

Amount of Each Disbursement this Period

12.25

C.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.113643

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

159.94

SUBTOTAL of Disbursements This Page (optional)

181.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113644

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.31

B.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113645

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.31

C.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113646

Date of Disbursement

/ /

Amount of Each Disbursement this Period

134.37

SUBTOTAL of Disbursements This Page (optional)

190.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113647 Date of Disbursement <div>10 / 15 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>83.57</div></p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113649 Date of Disbursement <div>10 / 16 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>51.24</div></p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113650 Date of Disbursement <div>10 / 17 / 2010</div></p> <p>Amount of Each Disbursement this Period <div>23.22</div></p>

SUBTOTAL of Disbursements This Page (optional)

158.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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HUCK PAC

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<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113659</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>1 9</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>51.98</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113660</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>46.99</div> </p>

SUBTOTAL of Disbursements This Page (optional)

143.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113662</p> <p>Date of Disbursement <div> <div>10</div> <div>21</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>183.20</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113663</p> <p>Date of Disbursement <div> <div>10</div> <div>22</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>135.55</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113664</p> <p>Date of Disbursement <div> <div>10</div> <div>23</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>28.19</div> </p>

SUBTOTAL of Disbursements This Page (optional)

346.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113665</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 4 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>25.61</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113666</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>35.00</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113673</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 6 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>13.59</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

74.20

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113674</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>2 7</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>83.70</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113675</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>2 8</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>135.60</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117349</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>2 9</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>33.89</div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

253.19

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.117350 Date of Disbursement
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div> <div>18.19</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.117351 Date of Disbursement
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 1 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div> <div>7.38</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.117352 Date of Disbursement
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div> <div>185.95</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

211.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117357 Date of Disbursement <div> <div>11</div> <div>02</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>110.13</div> </p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117358 Date of Disbursement <div> <div>11</div> <div>03</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>0.92</div> </p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117360 Date of Disbursement <div> <div>11</div> <div>04</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>8.82</div> </p>

SUBTOTAL of Disbursements This Page (optional)

119.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118052</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 5 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>2.43</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118053</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 6 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>0.52</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118054</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>6.45</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

9.40

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118055

Date of Disbursement

/ /

Amount of Each Disbursement this Period

0.93

B.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118056

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.97

C.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118057

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.82

SUBTOTAL of Disbursements This Page (optional)

10.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118058</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>3.89</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118059</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 3 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>1.97</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118060</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 4 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>3.45</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

9.31

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118061</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 1</div> <div>1 5</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>7.21</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118062</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 1</div> <div>1 6</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4.07</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.118063</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 1</div> <div>1 8</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>3.43</div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

14.71

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118064

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.55

B.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118065

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.20

C.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118066

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.08

SUBTOTAL of Disbursements This Page (optional)

18.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Paypal, Inc.

Mailing Address 4100 Solutions Center
#774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.118067

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.21

B.

Full Name (Last, First, Middle Initial)

Precision Funding dba JETEasy

Mailing Address 2820 Cantrell Road

City Little Rock State AR Zip Code 72202

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113639

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12947.32

C.

Full Name (Last, First, Middle Initial)

QualChoice

Mailing Address 10825 Financial Centre Parkway

City Little Rock State AR Zip Code 72211

Purpose of Disbursement
Employee Benefits - Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113678

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1256.06

SUBTOTAL of Disbursements This Page (optional)

14224.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Safe Foods</p> <p>Mailing Address 4801 North Shore Drive</p> <p>City North Little Rock State AR Zip Code 72118</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113625</p> <p>Date of Disbursement <div> <div>10</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>750.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Safe Foods</p> <p>Mailing Address 4801 North Shore Drive</p> <p>City North Little Rock State AR Zip Code 72118</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.113677</p> <p>Date of Disbursement <div> <div>10</div> <div>28</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>750.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) TCPrint Solutions</p> <p>Mailing Address 4150 East 43rd St</p> <p>City North Little Rock State AR Zip Code 72117</p> <p>Purpose of Disbursement Office Expense - Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117392</p> <p>Date of Disbursement <div> <div>11</div> <div>05</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>560.19</div> </p>

SUBTOTAL of Disbursements This Page (optional)

2060.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P.O. Box 8999

City State Zip Code
San Francisco CA 94128

Purpose of Disbursement
Credit Card Payment - See Memos

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.117354

Date of Disbursement

/ /

Amount of Each Disbursement this Period

337.04

B.

Full Name (Last, First, Middle Initial)
FedEx

Mailing Address 2903 Sprinkle Avenue

City State Zip Code
Memphis TN 38118

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.117354.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

62.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City State Zip Code
Maumelle AR 72113

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.117354.2

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.90

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

337.04

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City State Zip Code
Maumelle AR 72113Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117354.3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

5.95

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City State Zip Code
Maumelle AR 72113Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117354.4

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

220.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City State Zip Code
Maumelle AR 72113Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117354.5

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

14.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 / 134

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC**A.**Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City Maumelle State AR Zip Code 72113

Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117354.6

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

7.65

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City Maumelle State AR Zip Code 72113

Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117354.7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

4.90

[MEMO ITEM]**C.**Full Name (Last, First, Middle Initial)
Visa

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Payment - See Memos

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117355

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Amount of Each Disbursement this Period

1285.13

SUBTOTAL of Disbursements This Page (optional)

1285.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 501 Commerce Drive</p> <p>City Maumelle State AR Zip Code 72113</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117355.0</p> <p>Date of Disbursement <div> <div>11</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>19.35</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) NYC Taxi</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117355.2</p> <p>Date of Disbursement <div> <div>11</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>8.20</div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hilton Garden Inn NY</p> <p>Mailing Address 121 West 28th Street</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117355.4</p> <p>Date of Disbursement <div> <div>11</div> <div>01</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>392.51</div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Staples Direct

Mailing Address 500 Staples Drive

City
Farmington

State
MA

Zip Code
01702

Purpose of Disbursement
Office Expense - Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117355.5

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.42

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Dish Network

Mailing Address Department 0063

City
Palatine

State
IL

Zip Code
60055

Purpose of Disbursement
Office Expense - Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117355.8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Staples Direct

Mailing Address 500 Staples Drive

City
Farmington

State
MA

Zip Code
01702

Purpose of Disbursement
Office Expense - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.117355.9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.91

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Staples Direct	Transaction ID: SB21B.117355.10 Date of Disbursement
Mailing Address 500 Staples Drive	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 01 / 2010</div> </div>
City Farmington State MA Zip Code 01702	Amount of Each Disbursement this Period
Purpose of Disbursement Office Expense - Supplies	<div>171.69</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Staples Direct	Transaction ID: SB21B.117355.11 Date of Disbursement
Mailing Address 500 Staples Drive	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 01 / 2010</div> </div>
City Farmington State MA Zip Code 01702	Amount of Each Disbursement this Period
Purpose of Disbursement Office Expense - Supplies	<div>343.38</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.117356 Date of Disbursement
Mailing Address P.O. Box 8999	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 01 / 2010</div> </div>
City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment - See Memo	<div>237.41</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

237.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Hertz Rent a Car

Mailing Address 10500 W Markham St #109

City Little Rock State AR Zip Code 72205

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.117356.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

237.41

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

132168.96

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)

Mike Kemp for Mayor

Mailing Address 14223 Brechen North

City
Shannon Hills

State
AR

Zip Code
72103

Purpose of Disbursement
Campaign Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.118051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00